NAVCO – Aviation Support

LT Anthony Allard
Aviation Support Officer

Briefing for
Calendar for the Americas
October 2007

Overview

- Aviation Support Officer
- Governing Instructions
- Aerial Events
- DD FORM 2535 – Request for Military Aerial Support
- Blue Angels
- Tactical Demonstration (TACDEMO) Teams
- Legacy Flight
- Leap Frogs

Aviation Support Officer

- Collect all “Requests for Military Aerial Support” DD FORM 2535
- Ensure eligibility
- Create a working list of potential show sites for Blue Angels, Tactical Demonstration (TACDEMO) Teams, and Leap Frogs
- Coordinate with CNAF, AIRLANT, AIRPAC, CNATRA, CNAFR, Blue Angels, and Leap Frogs

Governing Instructions

- SECNAVINST 5720.44B – Public Affairs Policy & Regulations
  - Chapter 7: Community Relations
    - 0709: Naval Aerial Events
- OPNAVINST 3710.7T – Naval Air Training and Operating Procedures Standardization (NATOPS) General Flight and Operating Instructions
  - Chapter 3: Policy Guidance

Aerial Events

- Tactical Demonstrations (TACDEMOs)
  - F/A-18C Hornet, F/A-18F Super Hornet
    - Naval Air Station, Lemoore CA (VFA-122 & VFA-125)
    - Naval Air Station, Oceana VA (VFA-106)
  - S-3B Viking, E-2C Hawkeye
  - Legacy Flight
- Flyovers
  - Non-maneuvering
  - Separate from TACDEMO request
  - Not normally an air show event
- Static Displays
- Other Aerial Support; i.e., Parachute Demo, SAR Demo

Request for Military Aerial Support

- Sponsoring organization must submit the DD FORM 2535 request
- Allow plenty of time for FAA / CHINFO / NAVCO
- Eligible = Flyover

DD FORM 2535
Request for Military Aerial Support

REQUEST FOR MILITARY AERIAL SUPPORT
ALL EVENT SPONSORS MUST READ THE INSTRUCTIONS ON PAGE 4 BEFORE COMPLETING THIS FORM.

REQUEST NUMBER

Form Approved OMB No. 0704-0290 Expires Aug 31, 2006

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0290), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

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SECTION I - ACTIVITY

1. CATEGORY REQUESTED *(X and complete as applicable)*	(1) DATE OF EVENT *(YYYYMMDD)*	(2) TYPE AIRCRAFT REQUESTED ANY *(X)*	(2) TYPE AIRCRAFT REQUESTED SPECIFIC *(Optional)*	(3) MILITARY SERVICE REQUESTED ALL *(X)*	(3) MILITARY SERVICE REQUESTED SPECIFIC *(Optional)*
a. FLYOVER *(See paragraph 4 of Instructions)*					
b. STATIC DISPLAY *(See paragraph 5 of Instructions)*					
c. SINGLE AIRCRAFT DEMONSTRATION *(See paragraph 7 of Instructions)*					
d. OTHER AERIAL SUPPORT *(I.e. Parachute Demo, SAR Demo)*					

e. AERIAL DEMONSTRATION TEAM *(X all requested. See Instructions.)*	(a) PRIMARY DATE *(YYYYMMDD)*	(b) ALTERNATE DATE(S) *(YYYYMMDD)*	(c) I WILL CONSIDER ANY DATE DURING AIR SHOW SEASON *(X one)*
U.S. ARMY GOLDEN KNIGHTS			YES
U.S. NAVY BLUE ANGELS			
U.S. AIR FORCE THUNDERBIRDS			NO
OTHER *(Specify)*			

SECTION II - EVENT AND SITE INFORMATION

2.a. EVENT TITLE

b. SITE OF EVENT | c. SITE CITY, STATE AND ZIP CODE | d. SITE ELEVATION *(Feet above sea level)* | e. RUNWAY LENGTH X WIDTH

f. ARRESTING GEAR *(X one)* ☐ YES ☐ NO | g. TYPE OF SITE *(I.e., airport, park, lake, etc.)*

3. EVENT SITE CERTIFICATION *(To be completed by an agent exercising authority for site use)*
I certify that an agreement has been made with the sponsoring organization indicated in Section III to use the event site indicated in 2.b. above.

a. NAME *(Last, First, Middle Initial)* | b. TITLE | c. TELEPHONE NO. *(Include area code)*

d. SIGNATURE | e. DATE SIGNED *(YYYYMMDD)*

4. INCLUSIVE DATES OF EVENT *(YYYYMMDD)*

5. IS THERE CIVILIAN AVIATION/AERIAL PARTICIPATION PLANNED FOR THE EVENT? *(X one)* ☐ YES ☐ NO

6. ATTENDANCE
a. PROJECTED | b. PRIOR EVENT

7. PLANNED MEDIA COVERAGE *(X as applicable)* ☐ TELEVISION ☐ RADIO ☐ PRINT ☐ NONE

SECTION III - SPONSOR INFORMATION

8. LOCAL SPONSORING ORGANIZATION
a. NAME | b. TYPE *(X one)* ☐ PROFIT ☐ NONPROFIT

9. POINT OF CONTACT FOR AVIATION ACTIVITIES FOR THIS EVENT *(Please PRINT all contact information.)*
a. *(X one)* ☐ MS. ☐ MR. ☐ OTHER | b. NAME *(Last, First, Middle Initial)* | c. RANK *(If military)*

d. ADDRESS
(1) NUMBER AND STREET/SUITE NUMBER | (2) CITY | (3) STATE | (4) ZIP CODE

e. TELEPHONE NO. *(Include area code or DSN if military)* (1) (2) | f. E-MAIL ADDRESS | g. FAX NO. *(Include area code)*

10.a. EVENT TITLE | b. EVENT DATE

SECTION III - SPONSOR INFORMATION *(Continued)*

	YES	NO
11. IS EVENT OFFICIALLY SUPPORTED BY LOCAL GOVERNMENT *(X one)*		
12. WILL YOU PROVIDE POST-EVENT REPORT ON REQUEST? *(X one)*		
13. DOES SPONSORING ORGANIZATION PERMIT MEMBERSHIP WITHOUT REGARD TO RACE, RELIGION, SEX OR COLOR? *(X one)*		
14. WILL ALL ASPECTS OF THIS EVENT BE AVAILABLE TO ALL PERSONS WITHOUT REGARD TO RACE, RELIGION, SEX OR COLOR? *(X one)*		
15. WILL THE EVENT BE OPEN TO THE GENERAL PUBLIC? *(X one)*		

SECTION IV - FEDERAL AVIATION ADMINISTRATION COORDINATION *(Airspace Coordination)*

FOR THIS EVENT TO BE CONSIDERED FOR U.S. MILITARY SUPPORT, THE SPONSOR MUST HAVE THIS SECTION COMPLETED BY THE FLIGHT STANDARDS DISTRICT OFFICE RESPONSIBLE FOR CONTROLLING THE AERIAL ACTIVITIES AT THE EVENT SITE.

For events where the airspace falls under the purview of the United States Department of Transportation, Federal Aviation Administration (FAA) coordination is required for all U.S. military aviation activities described in Section I EXCEPT AIRCRAFT STATIC DISPLAYS. THE SPONSOR WILL FORWARD THIS DOCUMENT, WITH SECTIONS I THROUGH III AND SECTIONS V THROUGH VII COMPLETED, TO THE FLIGHT STANDARDS DISTRICT OFFICE (FSDO) HAVING JURISDICTION OVER THE SITE. After completion of Section IV by the FSDO, form will be returned to the sponsor for submission to DoD. Sponsors will allow a minimum of 45 days for FAA review and completion.

16. FLIGHT STANDARDS DISTRICT OFFICE REVIEW
I have reviewed the requested activity in Section I and determined that: *(X and complete as applicable)*

- a. FAA/OTHER GOVERNMENTAL WAIVER IS NOT REQUIRED.
- b. WAIVER IS REQUIRED FOR THE FOLLOWING EVENT(S) LISTED IN SECTION I: *(Specify)*
- c. COORDINATION HAS BEEN ACCOMPLISHED WITH CONTROLLING AIR TRAFFIC CONTROL FACILITY.
- d. AIR TRAFFIC COORDINATION IS NOT REQUIRED.
- e. DEMONSTRATION SITE FEASIBILITY STUDY IS REQUIRED AND SITE PLAN WAS SUBMITTED BY THE SPONSOR. *(Must meet show line, crowd line, airspace parameters and show congested areas, dwellings, thoroughfares, and obstructions within 3 NM of show center.)*
- f. DEMONSTRATION SITE FEASIBILITY STUDY IS NOT REQUIRED.
- g. NO MAJOR NOISE CONCERNS IN THE REQUESTED AIRSPACE.

17. FEASIBILITY DETERMINATION Based upon my review of this site, I find the site to be: *(X one)*
☐ SATISFACTORY ☐ CONDITIONAL SATISFACTORY *(See NOTE)* ☐ UNSATISFACTORY *(See NOTE)*

NOTE: If the show site is marked "Conditional Satisfactory", explain the conditions which must be met by the show sponsor to provide a "Satisfactory" site in the Additional Comments section. If the show site is marked "Unsatisfactory," the request for the applicable activity cannot be accepted by the Department of Defense.

18. ADDITIONAL COMMENTS *(Mandatory if FARs are waived)*

19. COORDINATING OFFICIAL
a. NAME *(Last, First, Middle Initial)* | b. FLIGHT STANDARDS DISTRICT OFFICE | c. TELEPHONE NO. *(Include area code)*

d. TITLE AND SIGNATURE | e. DATE SIGNED *(YYYYMMDD)*

20.a. EVENT TITLE | b. EVENT DATE

SECTION V - PROGRAM

21. PROGRAM THEME AND OBJECTIVE *(Please explain how aviation support is an integral part of the event.)*

22. CHARGES AND FEES
a. ADMISSION | b. PARKING | c. SEATING | d. OTHER *(Specify)*

e. DOES EVENT RAISE FUNDS? *(X one)* ☐ YES *(Complete 22.f. and 22.g.)* ☐ NO

f. FUNDS WILL BE USED FOR *(X as applicable)* ☐ (1) CHARITIES ☐ (2) EXPENSES ☐ (3) PRIZES ☐ (4) OTHER *(Explain in 22.g.)*

g. SPECIFIC INSTRUCTIONS FOR USE OF FUNDS

23. HISTORICAL INFORMATION
a. LIST ALL YEARS THE EVENT HAS BEEN HELD | b. LAST AERIAL DEMONSTRATION AND YEAR OF PERFORMANCE *(I.e., Blue Angels, Thunderbirds, Golden Knights)* | c. LIST CIVILIAN AND MILITARY AIRCRAFT AT LAST YEAR'S EVENT

SECTION VI - SUPPORT *(All Requests other than Flyovers)*

24. THE SPONSOR AGREES TO: *(Initial each item signifying acceptance.* **Lack of initials renders the event ineligible for all support other than Flyovers.***)*	INITIALS
a. OBTAIN THE AIR SHOW WAIVER FROM THE FAA MONITOR PRIOR TO THE EVENT FOR EACH ACTIVITY REQUIRING A WAIVER *(plan a 60-day lead time).* FAILURE TO OBTAIN A WAIVER WILL RESULT IN DEMONSTRATION CANCELLATION AT THE EXPENSE OF THE SPONSOR.	
b. PAY TEAM COSTS AS OUTLINED ON PAGE 4, PARAGRAPHS 6 OR 8 OF INSTRUCTIONS, AS APPLICABLE. *(Applies only for Blue Angels, Thunderbirds, or Golden Knights requests.)*	
c. PROVIDE OR REIMBURSE TRANSPORTATION, MEALS, AND QUARTERS COSTS *(including pre-event visits)* FOR ARMED FORCES PARTICIPANTS, AS REQUIRED. *(Reimbursement for demonstration teams covered in paragraphs 6 or 8 of Instructions.)*	
d. PROVIDE SUITABLE AIRCRAFT FUEL AT MILITARY CONTRACT PRICES. *(Sponsor must pay all costs over military contract prices, including any transportation and handling charges, if fuel is not available at such prices.)*	
e. PROVIDE SECURITY FOR AIRCRAFT AT EVENT SITE DURING ENTIRE STAY. *(Certain assets (i.e., B-2 and F-117) will require extensive security.)*	
f. PROVIDE MOBILE FIREFIGHTING, CRASH, AND GROUND-TO-AIR COMMUNICATIONS EQUIPMENT AT THE SHOW SITE FOR FLIGHT AND PARACHUTE DEMONSTRATIONS AND STATIC DISPLAY AIRCRAFT.	
g. PROVIDE AMBULANCE AND MEDICAL PERSONNEL ON SITE DURING FLIGHT AND PARACHUTE DEMONSTRATIONS AND CERTAIN OTHER TYPES OF AERIAL ACTIVITIES AS DETERMINED, IN ADVANCE, BY THE MILITARY SERVICES.	
h. PROVIDE TELEPHONE FACILITIES FOR NECESSARY OFFICIAL COMMUNICATIONS AT THE EVENT SITE.	
i. PROVIDE AERIAL PHOTOGRAPH AND AIRFIELD DIAGRAM UPON REQUEST.	
j. PROVIDE LOCAL MILITARY RECRUITERS, AT NO CHARGE, PRIME SPACE AT THE EVENT SITE FOR RECRUITING ACTIVITIES.	

SECTION VII - CERTIFICATION BY SPONSOR

25. PRESIDENT/CHAIRMAN OF SPONSORING ORGANIZATION/BASE OR WING COMMANDER *(If military sponsored)*
I certify that the information provided above is complete and accurate to the best of my knowledge. I understand that representatives from the military services will contact us to discuss arrangements and additional costs involved prior to final commitments. Any changes to the information on this form may invalidate eligibility for military participation.

a. SIGNATURE | b. DATE SIGNED *(YYYYMMDD)* | c. PRINT NAME AND TITLE

DD FORM 2535

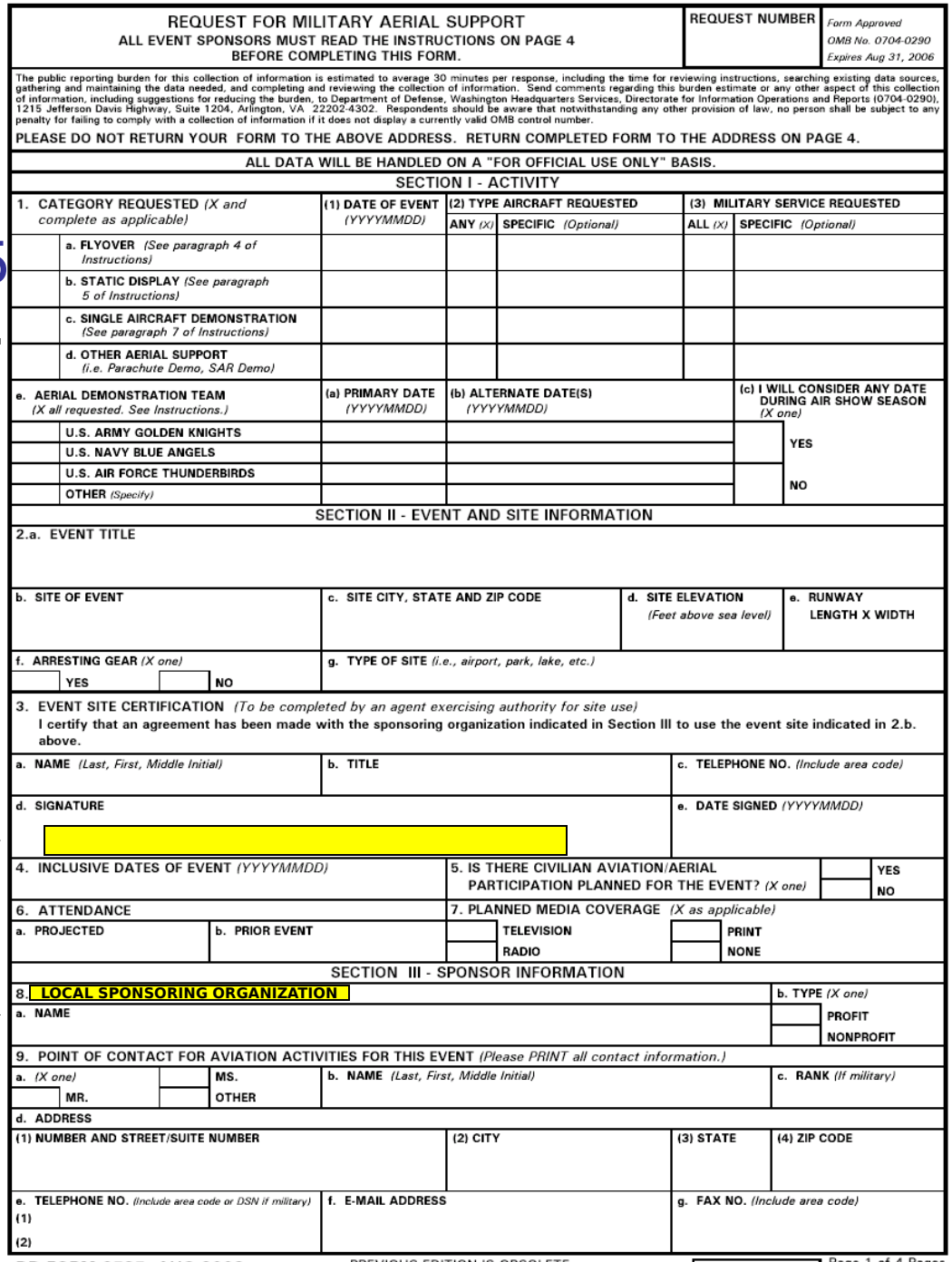
- Forms must be sent to ALL services separately if seeking multi-service support
- Ensure forms are complete and accurate
  - E-mail address must be legible
  - Phone numbers must be accurate
- Section II - Event and Site Information
  - Event site certification must be signed by the “owner” of the property

DD FORM 2535

Page 1

Event site certification signature block

Sponsoring organization signature block on page 3



REQUEST FOR MILITARY AERIAL SUPPORT
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REQUEST NUMBER

Form Approved
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d. OTHER AERIAL SUPPORT (i.e. Parachute Demo, SAR Demo)					

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U.S. ARMY GOLDEN KNIGHTS			YES
U.S. NAVY BLUE ANGELS			
U.S. AIR FORCE THUNDERBIRDS			NO
OTHER (Specify)			

SECTION II - EVENT AND SITE INFORMATION

2.a. EVENT TITLE

b. SITE OF EVENT	c. SITE CITY, STATE AND ZIP CODE	d. SITE ELEVATION (Feet above sea level)	e. RUNWAY LENGTH X WIDTH

f. ARRESTING GEAR (X one) YES NO

g. TYPE OF SITE (i.e., airport, park, lake, etc.)

3. EVENT SITE CERTIFICATION (To be completed by an agent exercising authority for site use)
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a. NAME (Last, First, Middle Initial)	b. TITLE	c. TELEPHONE NO. (Include area code)

d. SIGNATURE	e. DATE SIGNED (YYYYMMDD)

4. INCLUSIVE DATES OF EVENT (YYYYMMDD)	5. IS THERE CIVILIAN AVIATION/AERIAL PARTICIPATION PLANNED FOR THE EVENT? (X one)	
		YES
		NO

6. ATTENDANCE		7. PLANNED MEDIA COVERAGE (X as applicable)			
a. PROJECTED	b. PRIOR EVENT		TELEVISION		PRINT
			RADIO		NONE

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8. LOCAL SPONSORING ORGANIZATION

a. NAME	b. TYPE (X one)	
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		NONPROFIT

9. POINT OF CONTACT FOR AVIATION ACTIVITIES FOR THIS EVENT (Please PRINT all contact information.)

a. (X one)			b. NAME (Last, First, Middle Initial)	c. RANK (If military)
MR.		MS.		
		OTHER		

d. ADDRESS

(1) NUMBER AND STREET/SUITE NUMBER	(2) CITY	(3) STATE	(4) ZIP CODE

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(1)		
(2)		

DD FORM 2535, AUG 2003 PREVIOUS EDITION IS OBSOLETE. Reset Page 1 of 4 Pages

DD FORM 2535

Page 2

FAA must sign for flyovers!!!

10.a. EVENT TITLE	b. EVENT DATE

SECTION III - SPONSOR INFORMATION *(Continued)*

	YES	NO
11. IS EVENT OFFICIALLY SUPPORTED BY LOCAL GOVERNMENT *(X one)*		
12. WILL YOU PROVIDE POST-EVENT REPORT ON REQUEST? *(X one)*		
13. DOES SPONSORING ORGANIZATION PERMIT MEMBERSHIP WITHOUT REGARD TO RACE, RELIGION, SEX OR COLOR? *(X one)*		
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a. NAME *(Last, First, Middle Initial)*	b. FLIGHT STANDARDS DISTRICT OFFICE	c. TELEPHONE NO. *(Include area code)*
d. TITLE AND SIGNATURE		e. DATE SIGNED *(YYYYMMDD)*

DD FORM 2535

- Charges and fees
  - Please list all charges (admission, parking, etc.)
  - DOD takes a hard look at monies raised and where it goes (we research sites)
  - Event CAN NOT be the fundraiser for a specific charity or organization
  - Funds must be disseminated through broadly based charities

DD FORM 2535

Page 3

Charities

Sponsoring organization must agree to f-j for Leap Frogs and static displays

Sponsoring organization signature block

20.a. EVENT TITLE | b. EVENT DATE

SECTION V - PROGRAM

21. PROGRAM THEME AND OBJECTIVE *(Please explain how aviation support is an integral part of the event.)*

22. CHARGES AND FEES

a. ADMISSION	b. PARKING	c. SEATING	d. OTHER *(Specify)*

e. DOES EVENT RAISE FUNDS? *(X one)*	f. FUNDS WILL BE USED FOR *(X as applicable)*	g. SPECIFIC INSTRUCTIONS FOR USE OF FUNDS
YES *(Complete 22f. and 22g.)*	(1) CHARITIES	
NO	(2) EXPENSES	
	(3) PRIZES	
	(4) OTHER *(Explain in 22.g.)*	

23. HISTORICAL INFORMATION

a. LIST ALL YEARS THE EVENT HAS BEEN HELD	b. LAST AERIAL DEMONSTRATION AND YEAR OF PERFORMANCE *(i.e., Blue Angels, Thunderbirds, Golden Knights)*	c. LIST CIVILIAN AND MILITARY AIRCRAFT AT LAST YEAR'S EVENT

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a. SIGNATURE	b. DATE SIGNED *(YYYYMMDD)*	c. PRINT NAME AND TITLE

DD FORM 2535, AUG 2003 | Reset | Page 3 of 4 Pages

Blue Angels and TACDEMO's

- Air shows requesting the Blue Angels must have a completed 2535 submitted by 1 August the year prior.
  - Thunderbird / Blue Angel de-conflict
  - Repeat shows
  - Location, distance and logistical concerns

- F/A-18 Tactical Demonstration (TACDEMO) schedule
  - Forward proposed schedule to CNAL / CNAP 15 December
  - CNAF will publish approved schedule FEB / MAR
  - Estimated 50 – 60 events
  - Try to counter-balance with USAF Thunderbirds

Legacy Flight

- Started by VADM Bowman as a recruiting and retention tool for Naval Aviation in CY2000
- There are 10-14 civilian pilots flying WWII vintage Navy tail-hook aircraft
- Legacy flight consists of civilian warbird lead with Navy F/A-18's on wing
- Typically follows TACDEMO, 8 – 12 minutes total

Leap Frogs

- Civilian 2535 requests need to be submitted NLT 1 December the year prior
- Open dates will be filled throughout the year
- Find a sponsor to offset costs
- POC is JOC Robert Feinberg
  - (619) 572-4873
  - robert.feinberg@nsoc.navy.mil

NAVCO Aviation Support Web Site

- NAVCO Home Page
  http://www.navy.mil/navco
- Go to “Aviation Support” link
  - Eligible events
  - How to submit
  - Approval process
  - DOD FORM 2535
  - Points of contact
  - TACDEMO schedul
  - Blue Angels
  - Leap Frogs

Questions ?

Contact Me

- LT Anthony Allard
  Aviation Support Officer
  Navy Office of Community Outre
  5722 Integrity Drive
  Bldg 456-3
  Millington, TN 38054

  Phone: (901) 874-5803
  Fax: (901) 874-5813 or

  aviationsupport.fct@navy.mil